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Bib Data Sheet

CONFIRMATION NO. 4150

<b>SERIAL NUMBER</b> 09/913,597	<b>FILING DATE</b> 08/16/2001 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3736	<b>ATTORNEY DOCKET NO.</b> DVME-1015US
<b>APPLICANTS</b> Jozef Reinier Cornelis Jansen, Noordwijkerhout, NETHERLANDS; Johannes Jacobus Schreuder, Varese, ITALY;				
<b>** CONTINUING DATA *****</b> THIS APPLICATION IS A 371 OF PCT/NL00/00102 02/17/2000				
<b>** FOREIGN APPLICATIONS *****</b> NETHERLANDS 1011339 02/18/1999				
<b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> NETHERLANDS	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 5
<b>INDEPENDENT CLAIMS</b> 1				
<b>ADDRESS</b> 21302				
<b>TITLE</b> Method and apparatus for determining the cardiac output of a patient				
<b>FILING FEE RECEIVED</b> 430	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	